



IPW

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Complete if Known


| | |
|------------------------|-------------------|
| Application Number | 10/734,583 |
| Filing Date | December 15, 2003 |
| First Named Inventor | Hidetoshi ANDOU |
| Examiner Name | Not Yet Assigned |
| Group Art Unit | 3738 |
| Attorney Docket Number | 2923-595 |

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input checked="" type="checkbox"/> Supplemental Application Data Sheet and Second Request For Corrected Filing Receipt. | <input type="checkbox"/> Terminal Disclaimer | Copy Updated Filing Receipt as marked in red. |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

REMARKS:

| | | | | | |
|----------------------|---|--------------------------|-------------------|-------------------------|---------|
| SUBMITTED BY | | Complete (if applicable) | | | |
| NAME AND REG. NUMBER | Steven M. Giovannetti, Reg. No. 51,739 | | | | |
| SIGNATURE |  | DATE | December 30, 2004 | DEPOSIT ACCOUNT USER ID | 02-2135 |